



AFFIDAVIT OF COMPLIANCE WITH ROOF DECKING ATTACHMENT AND
SECONDARY WATER BARRIER Hurricane Retrofit for Existing Site-Built
Single Family Residential Structures

Form with fields: OWNER'S NAME, ROOFING PERMIT NUMBER, DATE, PROPERTY ADDRESS, CITY, STATE, ZIP

Dear Building Official:

I, _____ qualifying agent, certify that the roof decking attachment has
been completed in accordance with Florida Building Code, Existing Volume Section 706.7.1.1 or 706.7.1.2 and a secondary
water barrier has been provided in accordance with Florida Building Code, Existing Volume Section 706.7.2.

Signature of Qualifying Agent _____

Print Name _____

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me by means of

[] physical presence OR [] online notarizations

this _____ day of _____, 20 _____,

by _____

Signature of Notary Public _____

Print Name _____

NOTARY
(SEAL)

Personally known _____

or Produced Identification _____

Type of Identification Produced _____